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OCT 05 2006

Supplemental Application Data Sheet**Application Information**

Application number:: 10/031,722
Filing Date:: 03/06/06
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 1644
CD-ROM or CD-R?: None
Sequence submission?: None
Computer Readable Form (CRF)?:: No
Title:: HUMAN MONOCLONAL ANTIBODIES TO
HER2/NEU
Attorney Docket Number:: MXI-160US
Request for Early Publication?: No
Request for Non-Publication?: No
Small Entity?: No
Petition included?: No
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Tibor
Family Name:: KELER
City of Residence:: Ottsville
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 30 Park Road
City of mailing address:: Ottsville
State or Province of mailing address:: PA

Postal or Zip Code of mailing address:: 18942

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Yashwant
Middle Name:: M.
Family Name:: DEO
City of Residence:: East Brunswick
State or Province of Residence:: NJ
Country of Residence:: US
Street of mailing address:: 35 Cortland Drive
City of mailing address:: East Brunswick
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 08818

~~Applicant Authority Type:: Inventor~~
~~Primary Citizenship Country:: Netherlands~~
~~Status:: Full Capacity~~
~~Given Name:: Jan~~
~~Middle Name:: G. J.~~
~~Family Name:: VAN DE WINKEL~~
~~City of Residence:: Zeist~~
~~Country of Residence:: Netherlands~~
~~Street of mailing address:: Verlengde Slotlaan 80~~
~~City of mailing address:: Zeist~~
~~Country of mailing address:: Netherlands~~
~~Postal or Zip Code of mailing address:: 3707 GK~~

Applicant Authority Type:: Inventor
Status:: Full Capacity
Given Name:: Laura

Middle Name:: A.
Family Name:: VITALE
City of Residence:: Doylestown
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 4194 Milords Lane
City of mailing address:: Doylestown
State or Province of mailing address:: PA
Postal or Zip Code of mailing address:: 18901

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 59819

Domestic Priority Information**Foreign Priority Information****Assignee Information**

Assignee name:: MEDAREX, INC.
Street of mailing address:: 707 State Road
City of mailing address:: Princeton
State or Province of mailing address:: NJ
Postal or Zip Code of mailing address:: 08540